



EXPRESS MAIL NO. EV335395284US

# TRANSMITTAL FORM

(To be used for all correspondence  
after initial filing)

	Application Number	09/883,091
	Filing Date	June 15, 2001
	First Named Inventor	Edmund Y. Ting
	Art Unit	1744
	Examiner Name	Elizabeth L. McKane
	Attorney Docket No.	340058.535

**ENCLOSURES (check all that apply)**

- |   |   |  |
|---|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment/Response<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement; Form PTO-1449<br><input type="checkbox"/> Cited References<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts under 37 C.F.R. 1.52 or 1.53<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Request for Corrected Filing Receipt<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address<br><input type="checkbox"/> Declaration<br><input type="checkbox"/> Statement under 37 CFR 3.73(b)<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Return Receipt Postcard<br><input type="checkbox"/> Other Enclosure(s) (please identify below):<br><hr/> <hr/> <hr/> <hr/> |
|---|---|--|

Remarks

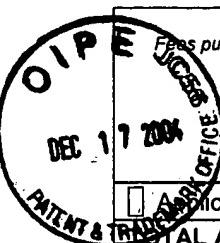
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Seed Intellectual Property Law Group PLLC	Customer Number <b>00500</b>
Signature		
Printed Name	Kevin S. Costanza	
Date	December 17, 2004	Reg. No. 37,801

**CERTIFICATE OF TRANSMISSION/MAILING**

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Signature	***SENT VIA EXPRESS MAIL***
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This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



Effective on 12/08/2004:  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL for FY 2005

**Complete if Known**

Application Number	09/883,091
Filing Date	June 15, 2001
First Named Inventor	Edmund Y. Ting
Examiner Name	Elizabeth L. McKane

 Applicant claims small entity status. See 37 CFR 1.27

Art Unit

1744

**TOTAL AMOUNT OF PAYMENT**

(\$120)

Attorney Docket No.

340058.535

**METHOD OF PAYMENT** (check all that apply) Check     Credit Card     Money Order     Other (please identify): \_\_\_\_\_ Deposit Account    Deposit Account Number: 19-1090    Deposit Account Name: Seed IP Law Group PLLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- |  |  |
|--|--|
| <input type="checkbox"/> Charge fee(s) indicated below                 | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee  |
| <input type="checkbox"/> Charge any additional fee(s) or underpayments | <input checked="" type="checkbox"/> Charge any underpayments or credit any overpayments of fee(s) under 37 CFR 1.16 and 1.17 |

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Provide credit card information and authorization on PTO-2038.

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Small Entity		Small Entity		Small Entity		
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Provisional	200	100	0	0	0	0	_____

**2. EXCESS CLAIM FEES****Fee Description**

<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>
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Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

50      25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200      100

Multiple dependent claims

360      180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
-20 or HP =	X	=		Fee (\$)

HP = highest number of total claims paid for, if greater than 20

Fee (\$)

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
-3 or HP =	X	=	

HP = highest number of total claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
-100 =	/50 =	(round up to a whole number)	x	

HP = highest number of total claims paid for, if greater than 20

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other: Extension of Time (1 Month)Fees Paid (\$)120**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	37,801	Telephone	206-622-4900
Name (Print/Type)	Kevin S. Costanza		Date	December 17, 2004	